mey Docket No.: 02307O-087900 Client Reference No.: 98-009-1

## **DECLARATION**

As a below named inventor, I	dec.	iare	that:
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inventor (if subject mar	f only one name is listed to tter which is claimed and EACTIVITY AND USES	pelow) or an original, first for which a patent is soug	and joint inventor (if plush ton the invention entitlation of which X is a	believe I am the original, fural inventors are named beed: ANTIGENIC EPITO attached hereto or (if applicable).	elow) of the PES WITH			
amendment application 35, United identified by which prior	t referred to above. I ack in accordance with Title 3 States Code, Section 119	cnowledge the duty to dis 7, Code of Federal Regula of any foreign application(	close information which tions, Section 1.56. I cla s) for patent or inventor's	uding the claims, as amer is material to the examina im foreign priority benefits s certificate listed below ar g date before that of the ap	ation of this under Title and have also			
11101 1010			- CT!!	Priority Claimed Under 35 USC 119	]			
	Country	Application No.	Date of Filing	33 03C 119				
CO Colored Col	nim the benefit under Title	35, United States Code § 1	19(e) of any United States	provisional application(s)	isted below:			
	App	plication No.	Filing Da	ate				
Felaim the the subject provided b information								
	Application No.	Date of Filing	St	tatus				

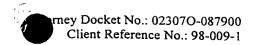


orney Docket No.: 02307O-08 7 900 ClientReference No.: 98-009-1

Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 1:	ROSE	LARRY	M.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:	Carmichael	US	US	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	5467 Wildflower Circle	Carmichael	CA	95608
Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 2:	MEARES	CLAUDE	F.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:	Davis	CA	US	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	421 Encina Avenue	Davis	CA	95616
Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 3:	O'DONNELL	ROBERT	Т.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:			US	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:		1		1

so made are punishable by fine willful false statements may ie	or imprisonment, or both, under Section 1 opardize the validity of the application or a	1001 of Title 18 of the United States Code, and any patent issuing thereon.
- William Taise statements may jo	sparation and variation of the approximent of the	
Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
LARRY M. ROSE	CLAUDE F. MEARES	ROBERT T. O'DONNELL
Date	Date	Date

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## **DECLARATION**

As a below named inventor, I declare that:

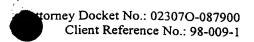
inventor (if subject ma LYM-1 RI	f only one name is listed tter which is claimed and EACTIVITY AND USES	d citizenship are as stated b below) or an original, first for which a patent is soug THEREOF the specificati 96 and was amended on	and joint inventor (if plu ht on the invention entitle on of which is attache	ral inventors are named be ed: ANTIGENIC EPITOI d hereto or X was filed	elow) of the PES WITH
amendment application 35, United identified by which prior	t referred to above. I ac in accordance with Title States Code, Section 119 below any foreign applicate rity is claimed.	contents of the above ide knowledge the duty to dis 37, Code of Federal Regula of any foreign application( ion for patent or inventor's	close information which tions, Section 1.56. I claims) for patent or inventor's	is material to the examina im foreign priority benefits certificate listed below an	tion of this under Title id have also
Prior Fore	eign Application(s)	<u> </u>	- c	Priority Claimed Under	
13	Country	Application No.	Date of Filing	35 USC 119	· ·
t⊍ fu L∏ L <u>h</u> ereby cl	aim the benefit under Title	35, United States Code § 1	19(e) of any United States	provisional application(s) l	isted below:
	Ar	oplication No.	Filing Da	nte	
[] .=					
		ited States Code, Section 12 ims of this application is no			
provided b	by the first paragraph of as defined in Title 37, C	Title 35, United States Coode of Federal Regulations, neternational filing date of the	ode, Section 112, I acknowledge Section 1.56 which occur	owledge the duty to discle	ose material
	Application No.	Date of Filing	St	atus	

Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 1:	ROSE	LARRY	M.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:	Carmichael	US	US	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	5467 Wildflower Circle	Carmichael	CA	95608
Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 2:	MEARES	CLAUDE	F.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:	Davis	CA	US	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:
Address:	421 Encina Avenue	Davis	CA	95616
Full Name of	Last Name:	First Name:	Middle Name o	r Initial:
Inventor 3:	O'DONNELL	ROBERT	T.	
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:
Citizenship:			US	
Post Office Address:	Post Office Address:	City:	State/Country:	Postal Code:

If turther declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

T		T
Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
I Myllo		
LARRY M. ROSE	CLAUDE F. MEARES	ROBERT T. O'DONNELL
Date 1/6/59	Date	Date

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## **DECLARATION**

As a below named inventor, I declare that:

		<del></del>		
	Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
	Country	Application 1.0.	Dutt of I ming	
y claim the be	nefit under Title	e 35, United States Code § 11	19(e) of any United States p	provisional application(s) listed
* .				
	A	pplication No.	Filing Dat	re
į			L	
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the benefit w	nder Title 35, U	nited States Code, Section 12	20 of any United States apport to the prior II	olication(s) listed below and, in the
ed by the fir	st paragraph of	Title 35, United States Co	ode, Section 112, I ackno	wledge the duty to disclose
ستعملا بمأسما	ed in Title 37, C	Code of Federal Regulations, international filing date of the	Section 1.56 which occurr	ed between the filing date of t
bject matter of	f each of the cla st paragraph of ed in Title 37, C	nims of this application is no Title 35, United States Co Code of Federal Regulations,	ot disclosed in the prior Under Section 112, I acknot Section 1.56 which occurr	nited States application wledge the duty to dis

orney Docket No.: 02307O-08 7 900 Client Reference No.: 98-009-1

Full Name of	Last Name:	First Name:	Middle Name or Initial:
Inventor 1:	ROSE	LARRY	M.
Residence &	City:	State/Foreign Country:	Country of Citizenship:
Citizenship:	Carmichael	US	US
Post Office	Post Office Address:	City:	State/Country:   Postal Code:
Address:	5467 Wildflower Circle	Carmichael	CA 95608
Full Name of	Last Name:	First Name:	Middle Name or Initial:
Inventor 2:	MEARES	CLAUDE	F.
Residence &	City:	State/Foreign Country:	Country of Citizenship:
Citizenship:	Davis	CA	US
Post Office	Post Office Address:	City:	State/Country: Postal Code:
Address:	421 Encina Avenue	Davis	CA 95616
Full Name of	Last Name:	First Name:	Middle Name or Initial:
Inventor 3:	O'DONNELL	ROBERT	Т.
Residence &	City:	State/Foreign Country:	Country of Citizenship:
Citizenship:			US
Post Office	Post Office Address:	City:	State/Country: Postal Code:
Address:			

Further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

IU		
Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
LARRY M. ROSE	CLAUDE F. MEARES	ROBERT T. O'DONNELL
Date	Date /2-15-51	Date

mey Docket No.: 02307O-087900 Client Reference No.: 98-009-1

# **DECLARATION**

As	a	below	named	inventor,	I	declare	that
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inventor (i subject ma LYM-1 RJ 28, 1998 as I have rev amendmen application 35, United identified by which prior	f only one name is listed latter which is claimed and EACTIVITY AND USES is Application No. 09/181,8 iewed and understand the at referred to above. I act in accordance with Title States Code, Section 119 below any foreign applicativity is claimed.	below) or an original, first for which a patent is soug THEREOF the specifications and was amended on contents of the above ide knowledge the duty to dis- 37, Code of Federal Regula of any foreign application(	and joint inventor (if plusht on the invention entitle on of which is attache (if applicantified specification, includes information which tions, Section 1.56. I class) for patent or inventor's	believe I am the original, final inventors are named be ed: ANTIGENIC EPITOR of hereto or X was filed able).  uding the claims, as amen is material to the examinating foreign priority benefits a certificate listed below any date before that of the ap	elow) of the PES WITH I on October added by any ation of this under Title ad have also
	Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119	
	aim the benefit under Title	35, United States Code § 11	19(e) of any United States	provisional application(s) l	isted below:
	Ap	plication No.	Filing Da	ıte	
d claim the the subject provided be information	matter of each of the clair by the first paragraph of on as defined in Title 37, Co	ms of this application is no Fitle 35, United States Co	ot disclosed in the prior Under Section 112, I acknowledge Section 1.56 which occur	plication(s) listed below and Inited States application in owledge the duty to disclot red between the filing date	the manner ose material
	Application No.	Date of Filing	St	atus	

Full Name of	Last Name:	First Name:	Middle Name o	r Initial:	
Inventor 1:	ROSE	LARRY	M.		
Residence &	City:	State/Foreign Country:	·	Country of Citizenship:	
Citizenship:	Carmichael	. US	US		
Post Office	Post Office Address:	City:	State/Country:	Postal Code:	
Address:	5467 Wildflower Circle	Carmichael	CA	95608	
Full Name of	Last Name:	First Name:	Middle Name o	l r Initial:	
Inventor 2:	MEARES	CLAUDE	F.		
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:	
Citizenship:	Davis	CA	US	•	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:	
Address:	421 Encina Avenue	Davis	CA	95616	
Full Name of	Last Name:	First Name:	Middle Name o	r Initial:	
Inventor 3:	O'DONNELL	ROBERT	T.		
Residence &	City:	State/Foreign Country:	Country of Citiz	zenship:	
Citizenship:	_		US	-	
Post Office	Post Office Address:	City:	State/Country:	Postal Code:	
Address:		<u></u> _	<u> </u>		

In the declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
LARRY M. ROSE	CLAUDE F. MEARES	ROBERT T. O'DONNELL
Date	Date	Date 11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1

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# **DECLARATION**

As a below named	inventor.	declare	that
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inventor (if subject mat LYM-1 RE 28, 1998 as	only one ter which ACTIVI Applicat	name is listed by its claimed and for the TY AND USES from No. 09/181,89	citizenship are as stated be elow) or an original, first a for which a patent is sough THEREOF the specification and was amended on	and joint inventor (if plust on the invention entitle in of which is attache (if applica	ral inventors are named ed: ANTIGENIC EPITO d hereto or X was file ble).	below) of the OPES WITH ed on October
amendment application 35, United identified b which prior	referred in accord States Co elow any ity is clai	to above. I ack lance with Title 3 ode, Section 119 of foreign applicati med.	contents of the above ider mowledge the duty to disc 7, Code of Federal Regular of any foreign application(s on for patent or inventor's	close information which tions, Section 1.56. I cla t) for patent or inventor's	is material to the exami im foreign priority benef certificate listed below	nation of this its under Title and have also
Prior Fore	ign Appl	ication(s)			Priority Claimed Unde	r
<b>'</b> 5		Country	Application No.	Date of Filing	35 USC 119	1
· <del></del>		Country	Application (10.	Date of 1 ming		
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**************************************	L					<del>'</del>
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I hereby cla	aim the b	enefit under Title	35, United States Code § 11	.9(e) of any United States	provisional application(s	) listed pelow:
i						
			U salina Ma	Filing Date		
		Ар	plication No.	Filling D.	atc	
4						
3						
≟ Iclaim the	hanafit u	nder Title 35 IIn	ited States Code, Section 12	20 of any United States at	plication(s) listed below	and, insofar as
I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner						
arounded by the first paragraph of Title 35 United States Code Section 112. Lacknowledge the duty to disclose material						
information as defined in Title 37. Code of Federal Regulations, Section 1.36 which occurred between the filling date of the prior						
application and the national or PCT international filing date of this application:						
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	Ap	plication No.	Date of Filing	S	tatus	
			<u> </u>	ļ		

. .omey Docker No.: 023070-08 7 900 Client Reference No.: 98-009-1

Full Name f Inventor 1:	Last Name: ROSE	First Name:	No. 11
Residence & Citizenship:	City: Carmichael	LARRY State/Foreign Country:	Middle Name or Initial:
Past Office Address:	Post Office Address:	US City:	Country of Citizenship:
Full Name of	5467 Wildflower Circle	Carmichael	State/Country: Postal Code: CA 95608
Inventor 2:	Last Name: MEARES	First Name:	Middle Name or Initial:
Residence & Citizenship:	City: Davis	CLAUDE State/Foreign Country:	F.
Post Office Address:	Post Office Address:	CA City:	Country of Citizenship:
ull Name of aventor 3:	421 Encina Avenue Last Name:	Davis First Name:	State/Country: Postal Code: CA 95616
esidence &	O'DONNELL (LO)	ROBERT NOW	Middle Name or Initial: T. Wall
ost Office ddress:	Sacramento Post Office Address:	State/Foreign Country:	Country of Citizenship: US Reply
	286 Howe Avenue, #B	City: Sacramento	State/Country: Postal Code: CA 95825

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Ū		patent issuing thereon.		
iii ku	Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor J	
	LARRY M. ROSE Date	CLAUDE F. MEARES Date	ROBERT T. O'DINNELL  Date  V	
לנו בין בין	36 <b>3</b> v1			
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